

**Appendix A**  
**Certified Unified Program Agency (CUPA) Application Cover Sheet**  
**Completeness Checklist**

JURISDICTION NAME: \_\_\_\_\_  
 CONTACT PERSON NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 MAILING ADDRESS (if different): \_\_\_\_\_  
 DATE OF APPLICATION: \_\_\_\_\_  
 TELEPHONE NUMBER: \_\_\_\_\_ FACSIMILE NUMBER: \_\_\_\_\_

ITEM	DESCRIPTION	CITATION	PAGE #
1	Appendix A\or this checklist	15150(e)(1)	
2	Demographic Information	15150(e)(4)	
3	Applicant Information	15150	
4	Implementation History	15150(e)(16)	
5	Geographic Scope	15150(e)(3), (e)(2)	
6	Structure of CUPA	15150(e)(5)	
7	Authorization	15150(c)	
7A	Regulatory Authority		
7B	Ordinances & Resolutions	15150(c)(1) & (2)	
8	CUPA and PA Issues	15150(d)	
9	Unified Program Implementation Plan	15150(e)(6)	
10	Consolidated Permit Plan	15150(e)(10)	
11	Inspection & Enforcement Plan	15150(e)(11)	
12	Fee Accountability Program	15150(e)(12)	
12A	Staff Resource Adequacy	15170(b)(3)(A-E) (b)(4), (b)(5)	
12B	Budget Adequacy/Annual Funding	15150(e)(14) 15170(c)	
12C	Contents of Fee Accountability Program and Cost Calculation Methods	15170(f) 15210(b)(1)	
13	Single Fee Implementation Plan	15150(e)(13)	
14	Reporting & Auditing Requirements	15150(e)(15)	
15	Recordkeeping & Cost Accounting Systems	15150(e)(17)	
16	Title 22, CCR, Section 66272.10 Compliance	15150(e)(18)	
17	Training and Technical Expertise	15150(e)(7) 15150(e)(8)	
18	Additional Program Elements	15150(e)(19)	
19	No Adverse Impacts/Less Fragmentation/Coordination and Consistency	15150(e)(20) 15150(e)(21)	
20	Certifications	15150(e)(9) 15150(e)(14) 15150(e)(15)	
21	Signature of Authorized Representative	15150(b)	
22	County Waiver of Surcharge Assessment (Optional)	HSC 25404.5(d)	
<b>TABLES</b>			
1	Enumerations/Demographic Information	15150(e)(4)	
2	Summary of Program Activities	15150(e)(16)	
3	Time Allocation of Staff	15150(e)(14) 15170(b)	
4	Training and Technical Expertise	15150(e)(7) 15150(e)(8)	
5	Reporting and Auditing Requirements		
6	Reporting and Auditing Requirements		
7	Surcharge Transmittal Report	15250(b)	
8	Annual Single Fee Summary Report	15280(b)	
<b>CHARTS</b>			
	Implementation Timeline	15150(e)(6)(A)	
<b>FIGURE</b>			
	Organizational Chart	15150(e)(5)	

Only one signature will be required for the Certified Unified Program Agency Application.  
 Please see the signature block located in Attachment 2 (Certification Sheet).